# **Rio Salado College**



RIO SALADO COLLEGE

A MARICOPA COMMUNITY COLLEGE

Exam Site Information for Candidates Western Regional Examining Board (WREB) 2021 WREB Hygiene Examination

Rio Salado College - Dental Clinic 2250 West 14<sup>th</sup> Street, Tempe, AZ 85281 480-377-4100

## Exam Site Information for Candidates

## 2021 WREB Dental Hygiene & Local Anesthesia Examinations

## Table of Contents

## 1. School Facility and Services

- Clinic Address, Building Access and Hours 2250 W. 14<sup>th</sup> Street, Tempe, AZ 85281, 480-377-4100, Clinic is on the NE corner of Park Lane and 14<sup>th</sup> Street. Clinic door faces Park Lane. Building will be open 6:00 am 6:00pm daily during the exam.
- School coordinator, Patricia Price can be reached at (480) 377-4101 or patricia.price@riosalado.edu
- All individuals including candidates, patients, WREB team, and examiners are required to wear face coverings and practice social distancing. Please refer to posted signs to keep you and our community safe. Any questions please refer to MCCCD COVID-19 webpage. https://www.maricopa.edu/coronavirus-covid-19
- Parking Parking is available on the west side of the clinic building and across the street to the south in the Rio Salado Parking Garage. There is no parking fees or permits required.
- Security and Emergency Services A roving security guard will be on site during open clinic hours of WREB. Contact the front desk to alert security guard if not visible. Security can be contacted by dialing 40911 from any Rio Salado phone or they are located in the suite north of the clinic.
- ATM Machine The nearest ATM is at the QuikTrip gas station on the southeast corner of 52<sup>nd</sup> street and University Drive (.8 miles)
- Food Services Onsite 1<sup>st</sup> floor of tower (main Rio Salado building across street from clinic) Mon - Fri 7a – 3p. Closed Sat and Sun.

## 2. Preparing for the Exam

- COVID-19 Pre-Screening of all candidates and patients will be required. Candidates must pre-screen patients with ADA Patient Screening Form. Candidates must submit ADA Patient Screening Form for themselves and their patients to the School Coordinator on the day of their exam. Forms can be found at the end of this document. Temperature checks will be conducted upon arrival to the facility and must be < 100.4°F.</li>
- PPE: Candidates are required to provide their own N95 or equivalent mask, Face Shield, and Disposable Gown during live patient care.
- Social Distancing: Operatory distancing for each candidate will be a minimum of 6 [six] feet to accommodate social distancing. Patient Screening The clinic is not available for patient screening outside of your regularly scheduled WREB

examination date.

- Radiographs Digital x-ray equipment is available for radiographs only on the day of the exam. Printed copies are available, see rental form for fees.
- Administration of Local Anesthetic Practitioner Availability A practitioner(s) from the school is <u>NOT</u> available to administer local anesthesia to candidates' patients.
- Dental Operatory Units Each cubicle has the following equipment:
  - Adec dental chair & light
    - All units accommodate right <u>or</u> left-handed operators
    - Adec delivery units have female quick disconnects for water and air
  - Hu Friedy Swerv Ultrasonic Units 30k or Dentsply Cavitron 30k
  - 4 hole handpiece hose
  - Suction equipment
  - View box are available upon request
  - Operator stool
  - Disposable air/water syringe tips
- Instruments See rental form, cash or credit card ONLY. Must fill out rental form, leave photo ID and payment to receive rental item.
- Expendable Materials See Appendices
- Sterilization Services Instrument sterilization will be available for those who desire it. Please clearly label the autoclave bag with your full name and date.
   <u>NO</u> candidate numbers please! Place your instruments in the bag and turn it in to the floor assistant. The instruments <u>may not be available on the day you take the exam</u>, depending upon your exam time. There will be NO sterilization at the end of the last exam day.
- Waste Disposal Sharps containers are located in each operatory (for needles and carpules only). A large biohazard bin is available in clinic for items other than needles that require biohazard disposal. All remaining waste can be placed in the garbage can at each bay.

## 3. During the Exam

- Infection Control (Surface Asepsis) The following lists the recommended protocol for cubicle disinfection. All supplies are located in the dental units.
  - Surface Disinfection is performed using a 2-Wipe technique with a presaturated wipe (1<sup>st</sup> wipe-clean, 2<sup>nd</sup> wipe – disinfect)
  - Disinfect the following items:
    - Instrumentation tray, unit\*, air/water syringe, hanger & hoses
    - Dental chair arms
    - Dental light handles (ONLY)\*
    - Evacuation syringe, hoses and hanger
    - Operator stool back and adjustments
    - Other personal items used during treatment

\*Avoid dental light shield and all electrical parts of unit, especially "Touch Pad for Chair Control".

- Barrier Wrap After the final disinfection has sat for 10 minutes, the unit is ready for barrier wrapping. All barrier wrap is provided in dosed units which will be at each unit.
  - The clinic uses the following which will be provided:
    - Dental Chair Back and Operator Stool Back Plastic Chair Bag
    - Operator Stool Adjustment Levers Plastic "T" Sleeves
    - Light Handles Plastic Sleeves
    - Assistant's Arm Plastic Chair Bag
    - Saliva Ejector/Hose Plastic Sleeves
    - Instrumentation Tray/Arm Plastic Chair Bag
    - Air/Water Syringe Plastic Sleeves
- Post-COVID 19 Infection Control Guidance in accordance with the CDC & ADA:
  - Face Shields are required as standard protocol during live patient care.
  - Level 3 mask and face shield are required during aerosol production Level
     3 mask with a face shield is required during non-aerosol production.
  - Disposable Gowns, Face Shields, Non-Latex Gloves will be required during live patient care.
  - Use of High-Volume Evacuation is required during aerosol production.
  - Medical Emergencies and Equipment

The person discovering the emergency will alert the WREB official.

The WREB official will assist by:

- Alerting the Rio Salado College site coordinator
- Facilitating the administration of oxygen/medical emergency kit/AED

The basics of CPR will be implemented by the WREB official - or - person(s) discovering the emergency.

The WREB official will determine if a call to emergency services is necessary. Dial 4-0911 from a Rio Salado landline.

AED – 911 – EMS is immediately notified when the door of the cabinet is opened. Still have someone call 40911 to ensure notification.

The Rio Salado College Public Safety Department will be notified to file a report of emergency.

Broken Instrument Protocol – A sterile Schwartz Perio Retriever instrument is located in the emergency kit.

Oxygen tank and Emergency Medical Kit are located near the WREB chief examiners' desk in the clinic.

First Aid Kit is located in the dispensary adjacent to the clinic.

AED – Located in main entrance hallway.

### 4. Travel and Accommodation Information

- Airport Information Phoenix Sky Harbor International Airport 4 miles from Rio Salado College
- Ground Transportation SuperShuttle or Taxi Public transit stops are not located close to college
- Hotel Accommodation See below:

#### **Comfort Suites Phoenix Airport**

1625 S 52<sup>nd</sup> St Tempe, AZ 85281 480-446-9500 \$65/night 0.5 mile

#### **Red Roof PLUS Tempe – Phoenix Airport**

2135 W 15<sup>th</sup> St Tempe, AZ 85281 480-449-3205 \$57/night 0.2 mile

#### Sheraton Phoenix Airport Hotel Tempe

1600 S 52<sup>nd</sup> St Tempe, AZ 85281 480-967-6600 \$120/night 0.5 mile

#### Hampton Inn & Suites Tempe/Phoenix Airport

1550 S 52nd St Tempe, AZ 85281 480-410-6400 \$104/night 0.4 mile

## 5. Appendices

- Expendable Disposable Materials List
- Campus Map
- Clinic Floor Plan
- Rental Form

APPENDIX A – Expendable Local Anesthesia and Dental Hygiene Materials List Provided by Exam Site Host (School) To be provided in sufficient quantities for all Dental Hygiene Candidates					
2x2 gauze squares     Cotton-tip applicators     Paper towels					
Air/water syringe tips	Drinking cups	Patient bib clips, disposable			
Antimicrobial mouthwash	Face masks	Patient napkins/bibs			
Anesthetic(s)	Facial tissue	Prophy paste			
<ul> <li>Local anesthetic(s) – with and without vasoconstrictors</li> </ul>	Gloves	Soap - Antimicrobial			
<ul> <li>Topical anesthetic(s)</li> </ul>	<ul> <li>Gloves, nonlatex (S,M,L,XL)</li> </ul>	Standard saliva ejectors			
Autoclave bags, small	Overgloves	Surface disinfectant wipes			
Autoclave bags, medium	Hand sanitizer	Syringe needles			
Autoclave tape	High volume evacuation tips	Tray covers			
Barrier covers/tape	Instrument trays, disposable	Trash bags			



#### **RIO SALADO COLLEGE**

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2323 W. 14<sup>th</sup> St., Tempe, Arizona 85281 480-517-8000 / 800-729-1197 www.riosalado.edu



## **Conference Center** @ Rio

- Auxiliary Services
- Bookstore
- Meeting Rooms

#### **Tower** @ Rio

- Student Services
- Library
- KJZZ, KBAQ & Sun Sounds of Arizona
- Café@Rio
- Computer Lab
- Testing
- Meeting Rooms

## **Rio @ Hohokam Drive**

- Administration
- Employee Services
- Faculty
- Instructional Helpdesk





Name:\_\_\_\_\_

I understand that the equipment I am renting **MUST** be returned at the end of my exam. A picture ID is required when submitting this form on the day of the exam. Your ID will be returned to you when you return the equipment to the front desk attendant.

<u>Rental:</u>	I am renting the following equipment:			
	Ultrasonic Inserts or Piezo Tips	\$15.00 ea		
	Prophy Handpiece	\$25.00 ea		
	Instruments	\$10.00 ea		
	Probe - UNC 12 Dental Mirror EXD 11/12 Explorer Bite Blocks Aspirating Syringe Hemostat XCP devices			
Supplies: I am purchasing the following supplies:				
	Disposable Gown	\$2.00 each		
	Digital Radiograph printed page	\$5.00 / page		
	Panelipse			
	PA'S/BWS/FMS			
TOTAL		\$		
Signatu	re	Date		
Office Us Received	,	*No checks accepted		

## **Patient Screening Form**

#### **Patient Name:**

	PRE-APPOINTMENT	IN-OFFICE
	Date:	Date:
Do you/they have fever or have you/they felt hot or feverish recently (14-21 days)?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Are you/they having shortness of breath or other difficulties breathing?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Do you/they have a cough?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Any other flu-like symptoms, such as gastrointestinal upset, headache or fatigue?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Have you/they experienced recent loss of taste or smell?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Are you/they in contact with any confirmed COVID-19 positive patients? Patients who are well but who have a sick family member at home with COVID-19 should consider postponing elective treatment.	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Is your/their age over 60?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Do you/they have heart disease, lung disease, kidney disease, diabetes or any auto-immune disorders?	🗌 Yes 🗌 No	🗌 Yes 🗌 No
Have you/they traveled in the past 14 days?	🗌 Yes 🗌 No	🗌 Yes 🗌 No

## Positive responses to any of these would likely indicate a deeper discussion with the dentist before proceeding with elective dental treatment.

• For testing, see the list of <u>State and Territorial Health Department Websites</u> for your specific area's information.

**ADA**